

Community Aids
(Financial Assistance to Counties for Human Services)



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Introduction

Community aids are state and federal funds that are distributed by the Department of Health and Family Services (DHFS) to counties for the provision of human services in two broad, statutorily-defined functional areas: (1) social services for low-income persons and children in need of protection and services; and (2) services for persons with needs relating to mental illness, substance abuse, or developmental disabilities. Although these two broad functional areas are authorized by separate statutory provisions and are frequently administered at the county level by separate agencies, these functions are considered to be related components of a coordinated state/local human services system.

In the 2001-03 biennium, a total of \$525.4 million (all funds) is budgeted for community aids. Of this amount, \$350.3 million is provided from state general purpose revenues (GPR) and \$175.1 million is budgeted with federal revenues (FED) from a variety of sources. Community aids comprise the largest source of state aids to counties. In calendar year 2002, counties received \$262.9 million in community aids. By comparison, state shared revenue aids to counties totaled \$191.6 million in that year.

Community aids are allocated to counties on a calendar year basis under a basic county allocation and five separate, categorical allocations. In the 2001-03 biennium, the basic county allocation

represents approximately 93% of funds allocated to counties under the community aids program; these funds may be spent for any eligible community aids service.

The state's human services programs funded through community aids are state-supervised and county-administered. Although counties have assumed increasing responsibility for the delivery of human services, the need for state monitoring reflects the significant amount of GPR and federal funding that supports these programs. Counties are also required to provide matching funds and, in most cases, provide funding in addition to these matching amounts to support their human services programs.

The term "human services" refers to a broad array of services provided to persons in need, including income maintenance payments and assistance with health care costs. Human services supported by community aids funding include: (a) crisis respite child care; (b) community living/support services, such as daily living skills training, respite care, and home-delivered and congregate meals; (c) work-related and day services; (d) community residential services, such as foster home care, adult family home care, shelter care, and community-based residential facilities; (e) community treatment services, including juvenile probation, supervision, reintegration, and after-care; (f) supported employment; (g) supportive home care services; (h) community prevention, access, and outreach; (i) transportation; and (j) some

inpatient and institutional care.

Other human service programs, such as services provided under Wisconsin Works (W-2), the county relief block grant, medical assistance, youth aids, and the community options program are separately funded and described in other informational papers prepared by the Legislative Fiscal Bureau.

Background

Before 1975, state and federal funding for mental health services, services for persons with developmental disabilities, and substance abuse services was allocated to counties based on requests received from county boards. The 1975-77 biennial budget act instituted the allocation of funding for these services on a per capita basis due to wide variation in funding requests, and differing county perceptions of need. Allocations to counties for social services were based on prior year expenditures.

In 1978, due to concerns regarding the allocation of aids for community programs, the Department of Health and Social Services (now the Department of Health and Family Services) established a study committee to review alternative approaches to these aid programs. The study committee objectives were to: (a) reaffirm the state/county partnership in providing community services; (b) provide a funding increase for community human service programs that reflected the rate of inflation; (c) provide greater equity in distributing aids; (d) create no mandates without funding; and (e) provide continued funding for state-initiated special needs. The study committee's recommendations, which were incorporated into Chapter 34, Laws of 1979 (the 1979-81 biennial budget act), resulted in the creation of the community aids formula. This formula calculated each county's need for funding based on three

factors: a need indicator, an urban-rural factor, and an ability to pay factor.

The formula determined each county's need for funding on a more equitable basis than had been established at the time. It was never intended however, that the formula be used to redistribute the base level of funding that counties received. Instead, as implemented in county contracts beginning January 1, 1980, increases were appropriated for community aids and distributed to those counties whose actual level of funding was lower than the level that those counties would have received if all funds were distributed based on the formula. Later distributions of increased funding for community aids also used the formula to target distributions to those counties which were underfunded relative to what they would have received, under a straight, formula-driven distribution of all community aids funds.

Funding Sources

Community aids funds include appropriations of state, general purpose revenues (GPR), and federal funds that are combined and distributed through specific allocations. In the 2001-03 biennium, approximately 93% is distributed to counties in the form of a basic county allocation (BCA). The remainder of the funds are distributed as categorical allocations for specific purposes. Counties are required to provide matching funds to most of these allocations. Table 1 summarizes the funding sources available for allocation of community aids funds for the 2001-03 biennium.

State and federal expenditures for community aids for each of the past 24 years are presented in Appendix I.

Federal Resources

A number of federal sources provide funding

Table 1: Community Aids Funding, By Source -- State Fiscal Years 2001-02 and 2002-03

Funding Source	2001-02 Actual	2002-03 Estimate	Total	Percent of Total
General Purpose Revenue*	\$172,911,900	\$177,353,700	\$350,265,600	66.7%
Federal				
Title IV-E -- foster care	\$27,837,700	\$27,837,700	\$55,675,400	10.6
Social services block grant*	28,255,500	27,492,900	55,748,400	10.6
TANF block grant	18,322,600	13,456,400	31,779,000	6.0
Substance abuse block grant*	9,735,600	9,735,600	19,471,200	3.7
Title IV-B -- child welfare	3,777,400	3,633,600	7,411,000	1.4
Community mental health block grant	<u>2,513,400</u>	<u>2,513,400</u>	<u>5,026,800</u>	<u>1.0</u>
Subtotal	\$90,442,200	\$84,669,600	\$175,111,800	33.3%
TOTAL FUNDING	\$263,354,100	\$262,023,300	\$525,377,400	100.0%

*Numbers reflect funding available after adjusting for Family Care and Milwaukee County's contribution for child welfare services in the county.

for community aids to counties. Four sources of funding authorized under the federal Social Security Act are distributed to counties through the BCA: (a) funding received for reimbursement of foster care expenses (Title IV-E); (b) the social service block grant (Title XX); (c) the temporary assistance for needy families (TANF) block grant (Title IV-A); and (d) funding for child welfare services (Title IV-B). These funds are not earmarked for specific purposes. Funds received from the substance abuse prevention and treatment block grant and the community mental health block grant are provided to counties as categorical allocations through community aids and are earmarked for specific purposes, as required by federal law.

Foster Care Reimbursement. In 2002-03, it is estimated that \$27.8 million will be distributed to counties through the community aids BCA from reimbursements received under Title IV-E of the Social Security Act. Title IV-E provides funding for a portion of the cost of services for children who meet certain financial eligibility criteria and are placed in out-of-home care. This criteria is based on the criteria for AFDC eligibility as of July 16,

1996. The AFDC program was eliminated under the 1996 federal Personal Responsibility and Work Opportunity Act. However, the financial criteria are still used to determine IV-E eligibility.

States are required to provide foster care maintenance payments to Title IV-E-eligible children if all of the following apply: (1) the removal of the child from his or her home and the foster care placement were based on a voluntary placement agreement signed by the child's parents or guardians or a judicial determination that remaining in the home would be contrary to the child's welfare; (2) reasonable efforts were made to eliminate the need for removal or to return the child to his home; and (3) care and placement of the child are the responsibility of specified public agencies. The determination as to Title IV-E eligibility is made at the time the child leaves the home of his or her natural parents.

Title IV-E reimbursement is provided for 50% of administrative costs and placement services. Maintenance payments are intended to cover the costs of food, shelter, clothing, daily supervision, child care, school supplies, general incidentals,

liability insurance for the child, and reasonable travel to the child's home for visits are reimbursed at the rate used for medical assistance reimbursement, approximately 58%. While certain requirements pertain to the earning of Title IV-E reimbursement, there are no federal requirements for the subsequent expenditure by states of these funds.

Social Services Block Grant. A major source of federal funding for human services is provided under the social services block grant -- Title XX of the Social Security Act. In 2002-03, \$27.5 million is estimated to be available from the social services block grant for distribution to counties through community aids.

The social service block grant is distributed to states on the basis of population to provide services directed toward at least one of five goals: (a) to prevent, reduce, or eliminate economic dependency; (b) to achieve or maintain self-sufficiency; (c) to prevent neglect, abuse, or exploitation of children and adults; (d) to prevent or reduce inappropriate institutional care; and (e) to secure admission or referral for institutional care when other forms of care are not appropriate. States may transfer up to 10% of their allotment for any fiscal year to preventive health and health services, alcohol and drug abuse services, mental health services, maternal and child health services, and low-income home energy assistance block grants. States can also use funds for staff training, administration, planning, implementing, or administering the state's social service plan.

Social service block grant funds cannot, however, be used for: (a) medical care except family planning, rehabilitation, and certain detoxification services; (b) the purchase of land, construction, or major capital improvement; (c) most room and board expenses, except emergency short-term services; (d) educational services generally provided by public schools; (e) most social services provided in and by employees of hospitals, nursing homes, and prisons; (f) cash

payments for subsistence; (g) child day care services that do not meet state and local standards; and (h) wages to individuals as a social service, except wages of welfare recipients employed in child day care.

Although no state match is required for these funds, states must prepare a plan that assures that these funds will be expended for appropriate social services. Under the current state plan, child day care, specialized transportation services, community living, and support services (including family planning and supportive home care) are identified as state priorities.

TANF Block Grant Funds. The temporary assistance for needy families (TANF) block grant was created by the 1996 federal Personal Responsibility and Work Opportunity Act (PRWOA) as a replacement to the AFDC program. Under current federal law, a state may use up to 4.25% of its block grant allocation consistent with the requirements of the social services block grant. PRWOA specifies that any funds used in this manner are subject to the federal social service block grant requirements and not to TANF block grant requirements. In past years, states were allowed to use up to 10% of the TANF block grant for social services block grant purposes.

In the 2001-03 biennium, \$31.8 million (\$18.3 million in 2001-02 and \$13.5 million in 2002-03) of Wisconsin's TANF block grant allocation is received by DHFS to be used as social service block grant funds and distributed to counties through community aids. These funds are subject to the same requirements identified above for the social service block grant.

Substance Abuse Prevention and Treatment Block Grant. In 2002-03, an estimated \$9.7 million will be distributed from the substance abuse prevention and treatment (SAPT) block grant to counties through community aids allocations. This block grant is intended to support projects for the development and implementation of prevention,

treatment, and rehabilitation activities directed to substance abuse. Federal guidelines for the SAPT block grant require that, at a minimum, 20% of block grant funding be spent on education and prevention activities and 10% of the grant be used to expand substance abuse treatment services for pregnant women and women with dependent children. In addition, federal guidelines require treatment programs for intravenous drug abuse that are supported by the SAPT block grant to admit individuals into treatment within 14 days after making such a request or 120 days of such a request, if interim services are made available within 48 hours. Further, states must provide, directly or through contract, tuberculosis services such as counseling, testing, treatment, and early intervention services for substance abusers at risk for the human immunodeficiency virus (HIV) disease. Counties decide what specific services will be provided with SAPT block grant funds, but must comply with federal guidelines.

Child Welfare Funds. Child welfare funds are provided under Title IV-B of the Social Security Act for permanency planning for children. Unlike Title IV-E (foster care) funding, child welfare funds may not be used to fund out-of-home care, nor may these funds be used to provide child care that is exclusively work-related. The primary purpose of federal child welfare funding is to keep children with their own families. These services include respite care, intensive family treatment, and individual and family counseling. A portion of this funding is also allocated to Native American tribes. Funds are distributed to states on the basis of their under-21 population and per capita income. In 2002-03, it is estimated that \$3.6 million will be available for community aids under Title IV-B child welfare funding.

Community Mental Health Block Grant. For 2002-03, an estimated \$2.5 million will be distributed from the federal community mental health block grant to counties to provide comprehensive community mental health services to adults with serious mental illness and to children with a seri-

ous emotional disturbance, evaluate programs and services and conduct planning, administration, and educational activities related to providing services. Services provided with funds from the block grant include: (a) respite care; (b) adult family home care; (c) community prevention services; (d) crisis intervention; and (e) counseling and therapy. Federal guidelines allow up to 5% of the block grant to pay for administrative costs. Funds, among other restrictions, may not be used to provide inpatient services or to make cash payments to intended recipients of health services.

General Purpose Revenue

The largest source of funding for community aids is state, general purpose revenues (GPR). For the 2002-03 fiscal year, \$177.4 million GPR is appropriated for community aids. As Table 1 indicates, GPR funds comprise approximately 66.7% of all community aids funds in the 2001-03 biennium.

County Matching Funds

The statutes require counties to provide matching funds for the basic county allocation and the Alzheimer's family and caregiver support allocation. Counties are not required to provide matching funds for the family support program and the SAPT and community mental health block grant allocations.

Under current practice, the match requirement for the Alzheimer's family and caregiver support allocation has not been applied uniformly to all counties. Counties have the option of receiving their Alzheimer's allocation through their department of social services, human services, area aging agency, or department of health. DHFS has required only those counties that receive their allocation through their department of human services or social services to provide the match. Those counties that receive their allocation through their area aging agency or their department of health are not required to provide the match. For 2002, 23 counties received their Alzheimer's family

and caregiver support allocation through their area aging agency, and one county received its allocation through its department of health.

The required county match to state and federal community aids funding is established by statute at 9.89%. County matching funds may be provided from county tax levies, state revenue sharing funds, or private donations. Private donations cannot exceed 25% of the required county match. A county's community aids allocation is reduced by one dollar for each county match dollar not expended.

In 2001, \$43,400 in community aids funding was not allocated to Florence County due to underspending of county matching funds. This unallocated community aids funding represented less than one percent of the required total county match for all 72 counties (\$30.6 million in 2001).

Most counties provide county funds in excess of the required match. As shown in Figure 1, during the fourteen-year period beginning in 1987, county expenditures over the required match have increased from \$49.2 million in 1987 to \$251.8 million in 2001, which is the highest level of county overmatch in the specified time span. Appendix II provides specific county by county information on reported "overmatch" spending for calendar years 2000 and 2001. These "overmatch" funds are

supported primarily through county property tax revenue.

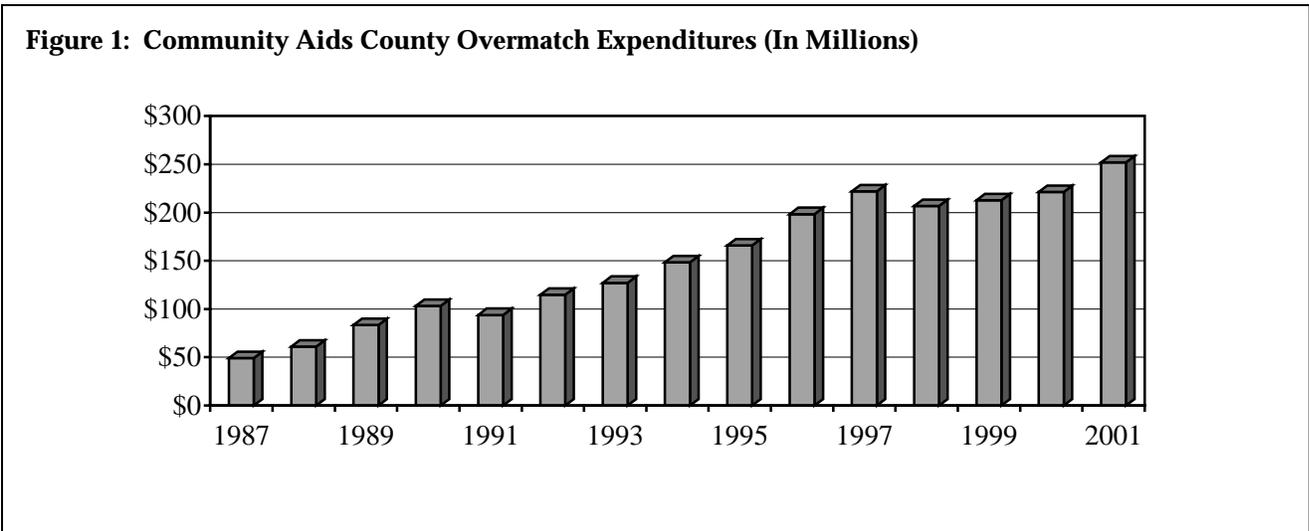
Eligibility Criteria and Fees

All persons who are eligible for supplemental security income (SSI) or medical assistance are eligible for services funded through county social services agencies. In addition, persons who have income at or below levels determined by DHFS are eligible for these services. For calendar year 2002, this level is 75% of the state's median income, or \$3,330 per month for a family of three. Counties may choose to provide services to persons with higher incomes.

Counties are required to charge fees, based on the ability to pay for certain services. Counties are prohibited from charging fees for certain other services and are permitted, but not required, to assess a fee for other services. Appendix III provides greater detail regarding services for which fees are mandatory, exempt, or optional.

By rule, DHFS establishes a uniform fee schedule that is used for all fees, except under certain circumstances. The amount paid varies depending on the number of persons in the family

Figure 1: Community Aids County Overmatch Expenditures (In Millions)



and the amount of monthly income the family receives. For example, in 2002, a family of three with gross monthly income of \$2,030 would be required to pay a monthly fee of \$5 for services received. A family of three with gross monthly income of \$3,000 would be required to pay a monthly fee of \$182 for services received.

Parents who are ordered by a court to pay child support for a child in substitute care, as determined by the child support percentage standard, are exempt from the requirement that they also pay uniform fees for the substitute care services that are provided by the county.

Allocation Methods

Community aids are allocated in the form of a basic county allocation (BCA) and several categorical allocations that are earmarked for certain purposes. This section explains each categorical allocation and describes the basis on

which the funds within each allocation are distributed to counties. Table 2 indicates the funding levels for the BCA and the categorical allocations for calendar years 2002 and 2003.

Basic County Allocation

Basic county allocations are funds distributed to counties that are not earmarked for specific services, although counties must expend these funds for eligible community aids services. Appendix IV provides county-by-county community aids allocations to counties for 2003. Eligible community aids services are identified in Appendix V.

Maintenance-of-Effort and Other Requirements. Although counties have considerable flexibility in determining how the basic county allocation is used, counties are required to provide funding from this allocation to meet certain maintenance-of-effort requirements.

First, due to federal requirements relating to the SAPT block grant, counties are required to provide funding from the BCA for substance abuse

Table 2: Community Aids – Calendar Years 2002 and 2003

	2002	2003
Basic County Allocation	\$243,307,900	\$242,174,000
Categorical Allocations		
Substance abuse prevention and treatment block grant	\$9,735,700	\$9,735,700
Family support program	4,964,800	4,964,800
Community mental health block grant	2,513,400	2,513,400
Alzheimer's family and caregiver support program	1,919,800	1,919,800
Tribal child care	412,800	412,800
Subtotal -- Categorical Allocations	<u>\$19,546,500</u>	<u>\$19,546,500</u>
GRAND TOTAL	\$262,854,400	\$261,720,500

*Because the 2002-03 state fiscal year ends June 30, 2003, and state contracts with counties are based on a calendar year, the amounts appropriated for January-June, 2003, have been doubled to estimate amounts for 2003.

**Numbers reflect adjustments for Family Care.

services, in at least the amount budgeted for these services in 1982 (\$21.4 million statewide). For 2002-03, DHFS estimates that counties would expend approximately \$31.9 million statewide for substance abuse services.

Additionally, counties that receive funding to supplement payments for the care of individuals to allow them to continue to live in a family home or other noninstitutional setting after becoming age 18 are prohibited from using these funds to replace funds previously used by the county for this purpose.

Counties use their basic county allocations to support services they are required to provide under state and federal law. For example, counties are required to investigate suspected child and elder abuse cases within 24 hours of receiving a report.

Family Care. The Family Care program is a pilot program that is intended to consolidate and replace current long-term care programs. Five counties operate Family Care pilot programs: Fond du Lac, La Crosse, Milwaukee, Portage, and Richland Counties. Family Care was fully implemented as of April, 2002.

Community aids are used to support long-term care programs in counties. Therefore, with the introduction of Family Care, some clients who are currently being served through community aids funded programs will now be served through Family Care, and counties will not need to provide these long-term care programs under community aids. Thus, the BCA is annually adjusted for the Family Care pilot counties beginning in calendar year 2001 and the funds from the BCA are transferred to support Family Care.

The categorical allocation for the Alzheimer's family and caregiver support program (AFCSP) is also adjusted for Family Care counties. Current AFCSP participants in the Family Care pilot counties have the choice of remaining in AFCSP or

enrolling in Family Care and receiving AFCSP services through Family Care, if they meet the Family Care financial eligibility criteria. Counties maintain funding to serve their current clients in AFCSP. When an individual leaves the AFCSP, for whatever reason, DHFS transfers the appropriate funds to the Family Care budget.

Individuals who are not currently enrolled in AFCSP but are eligible for services and meet the Family Care requirements must receive their services through Family Care. However, 2001 Wisconsin Act 16 (the 2001-03 biennial budget act) allows individuals who live in a Family Care county and who are eligible for AFCSP, but not Family Care, to receive services under AFCSP. Family Care counties continue to receive funding to serve these individuals through AFCSP.

Additional information on the Family Care program is provided in Informational Paper #48, prepared by the Legislative Fiscal Bureau, entitled "Community-Based Long-Term Care Programs."

Milwaukee County's Contribution for Child Welfare Services. Milwaukee County is required to provide \$58,893,500 annually to DHFS for the costs of providing child welfare services in Milwaukee County by DHFS. Before 2002, the County could decide how it would provide these funds through a variety of state aid payments, including shared revenue and community aids. Act 16 requires Milwaukee County to make its \$58,893,5400 annual contribution as follows: (a) through a reduction of \$37,209,200 from the amount DHFS distributes as the basic county allocation under community aids; (b) through a reduction of \$1,583,000 from the SAPT block grant that DHFS distributes as a categorical allocation under community aids; and (c) through a deduction of \$20,101,300 from shared revenue payments. The community aids contribution represents the Department's estimates of the amount of community aids funding Milwaukee County was spending on child protective services at the time DHFS assumed responsibility of these

services (January 1, 1998).

As a result of this change, the funding that was budgeted in community aids and then transferred to the Bureau of Milwaukee Child Welfare is now directly budgeted in the Bureau and not in community aids. This change simplified the administrative mechanism DHFS uses to support the Milwaukee child welfare system, but did not affect the total amount of funding available to provide services or other counties' allocations.

Categorical Funding

For calendar year 2003, estimated funding for five categorical allocations is \$19.5 million, while the BCA is estimated to total \$242.2 million. The categorical allocations for the SAPT block grant and the community mental health block grant reflect federal requirements that these funds be distributed for specific purposes. These requirements were described previously in this paper. The following section describes the categorical allocations for the family support program, the Alzheimer's family and caregiver support program, and tribal child care.

Family Support Program. Funding for the family support program was first provided in 1983. Under this program, grants are allocated to enable children with severe disabilities to remain at home with their parents. For purposes of program eligibility, a disabled child is a child who is physically, mentally, or emotionally impaired and is substantially limited in being able to perform at least three of seven functions of daily living, including self-care, receptive and expressive language, learning, and mobility.

The program provides up to \$3,000 in services and goods annually to eligible families. Services include training for parents in behavioral management, respite care, home modification and attendant care. Up to 10% of the funds allocated to a county may be used to pay for staff and other administrative costs. In 2002-03, \$5,089,800 is budg-

eted for the program. More information on this program is provided in Informational Paper #49, prepared by the Legislative Fiscal Bureau, entitled "Services for Persons with Developmental Disabilities."

Alzheimer's Family and Caregiver Support Program. The Alzheimer's family and caregiver support program funds services and goods to persons with Alzheimer's disease and their families (or caregivers) to enable the family to maintain the person with Alzheimer's disease as a member of the household. Typical services provided through this program include respite care and adult day care. Individuals who receive services through this program may live in their own homes or in some other residential setting, such as an adult family home (a residential placement for an adult which is similar to foster care for a child) or a community-based residential facility (CBRF). The program does not provide services to individuals who live in an institutional setting, such as a nursing home. In 2001-02, \$2,064,800 GPR and in 2002-03, \$1,919,800 GPR is budgeted for the program.

Tribal Child Care. Under the community aids allocations, \$412,800 is provided annually for use by federally recognized American Indian tribes or bands to provide child care for children that meet the definition of an eligible child for the federal child care and development block grant. Under federal law, an eligible child is a child: (a) who is less than 13 years of age; (b) whose family income does not exceed 85% of the state median income for a family of the same size (\$53,921 for a four-person family based on 2002 income); and (c) who resides with a parent or parents who are working or attending a job training or educational program or is receiving, or needs to receive, protective services. Funding is distributed to the tribes through the consolidated family services program, a distribution mechanism for tribal human services allocations. Table 3 identifies the annual allocations of child care funds to the tribes in the 2001-03 biennium.

**Table 3: Tribal Child Care Annual Allocations
Federal Fiscal Years 2001-02 and 2002-03**

Tribe	2001-02	2002-03
Bad River Band	\$54,325	\$51,959
Ho Chunk Nation	30,264	26,008
Lac Courte Oreilles Band	43,225	40,859
Lac du Flambeau Band	32,924	30,558
Menominee Tribe	35,714	33,815
Oneida Tribe	61,682	59,760
Potawatomi Tribe	29,309	54,500
Red Cliff Band	33,431	31,066
Sokaogon Chippewa Community	30,978	28,058
St. Croix Chippewa Indians	32,070	30,259
Stockbridge-Munsee Community	<u>28,878</u>	<u>25,958</u>
Total	\$412,800	\$412,800

Carry-Forward Provisions. The Department is required, at the request of a county, tribe or nonprofit organization, to carry forward up to 3% of the total amount of community aids funds allocated to that entity for a calendar year for use in the following calendar year. However, certain restrictions apply to this carry-forward authority:

- All funds carried forward for a tribe or nonprofit organization and all federal child welfare funds and SAPT and community mental health block grant funds carried forward for a county must be used for the purpose for which the funds were originally allocated;
- Funds carried forward for a county may not be used for staff or administrative costs;
- Any funds allocated to a nonprofit organization may not be carried forward unless the organization continues to be eligible in the subsequent year to receive that funding; and
- The county match requirement applies to any funds carried forward that were originally required to be matched.

DHFS may carry forward an additional 10% for unforeseen emergencies, for justifiable unit services costs above planned levels, and to provide compensation for increased costs due to population shifts.

A total of approximately \$220,700 was carried forward for counties from 2002-03. Those funds not carried forward lapse to the general fund at the end of each fiscal year. In 2002, no funds lapsed to the general fund.

Summary Data on Community Aids Allocations

Appendix VI provides county-by-county allocations for 1997 through 2003 and Appendix VII ranks counties based on community aids funding per capita for 2003.

Additional Foster Care

As indicated previously, Title IV-E foster care funds are received as reimbursement for expenditures made on behalf of Title IV-E eligible children. However, the community aids allocations are determined based on estimates of the amount of foster care funds that will be received in a given year. If the state does not receive the estimated amount of foster care funds, then counties' community aids allocations are adjusted downward.

Prior to enactment of 1997 Wisconsin Act 27, if DHFS received any excess foster care funds, meaning funds in addition to the amounts estimated and included in the community aids allocations, and DHFS proposed to allocate the excess funds so that the statutory allocations for community aids were exceeded, DHFS had to submit a plan to the Department of Administration (DOA) for approval. If DOA approved the plan, then the plan was submitted to the Joint Committee on Finance under a 14-day passive-approval process. Any funds not approved for

allocation to the counties were deposited to the state's general fund.

In an effort to encourage counties to increase their claims under Title IV-E and therefore, revenue to the state, Act 27 provided a mechanism that would automatically distribute a portion of any additional Title IV-E funds to counties. Historically, no excess foster care funds were distributed to the counties. Rather, any excess foster care funds were deposited to the general fund. Act 27 provided that if on December 31 of any year, there remains unspent or unencumbered Title IV-E funds that exceed the amounts estimated and allocated under community aids, then DHFS is required to carry forward these excess Title IV-E funds and distribute at least 50% to counties other than Milwaukee County for services and projects to assist children and families. [Milwaukee County is not eligible for these funds since DHFS is responsible for providing child welfare services in Milwaukee County and therefore incurs the foster care costs under Title IV-E.] Of the excess Title IV-E funds distributed to counties, at least 50% must be used to provide services for children who are at risk of abuse or neglect in order to prevent the need for child abuse and neglect intervention services. Further, counties cannot use these funds to supplant any other funds expended by the county for services and projects to assist children and families.

Any remaining excess Title IV-E funds are deposited in a DHFS appropriation to support the operational costs of augmenting income to the state under Title IV-E, medical assistance, and Medicare. As provided in 1997 Wisconsin Act 86, if DHFS proposes to use any of these additional funds for any purpose other than augmenting income, then DHFS must submit the plan to DOA for approval. If DOA approves the plan, then the plan is submitted to the Joint Committee on Finance under a 14-day passive-approval process.

Through this process, some Title IV-E funds have been transferred to the general fund. In

Table 4: Distribution of Title IV-E Funds State Fiscal Year 1994-95 to 2000-01

Year	Community Aids Basic County Allocation	Amount Transferred to General Fund
1994-95	\$27,414,300	\$7,814,700
1995-96	38,900,740	138,322
1996-97	40,151,000	0
1997-98	40,222,600	0
1998-99	40,379,700	382,300
1999-00	40,379,700	12,013,200
2000-01	41,645,900	6,100,000
2001-02	27,837,700**	9,802,300
2002-03*	27,837,700	4,092,500

*Estimate

**Distribution decreased due to change in Milwaukee County contribution for child welfare services per 2001 Wisconsin Act 16.

October, 2000, the Joint Committee approved a lapse of \$9,802,300 of income augmentation funds in 2000-01. In total, 2001 Wisconsin Acts 16 and 109 required that \$13,894,800 from DHFS income augmentation receipts be lapsed into the general fund in the 2001-03 biennium. Table 4 identifies the amount of excess foster care funds that have been deposited to the general fund since 1994-95.

In both 2002 and 2003, \$6.8 million in additional Title IV-E foster care funds were distributed to counties. This funding is provided in addition to the community aids allocations identified earlier in this paper. Appendix VIII identifies the allocation of these funds to counties.

Delivery of Human Services

Under state law, each county board of supervisors is responsible for establishing the county organizational structure for the delivery of human services. These county departments have the function, duty, and power, in accordance with the rules promulgated by DHFS and subject to DHFS supervision, to administer social services as

provided under Chapters 46 and 48 of the statutes and mental health and substance abuse services and services for the developmentally disabled as provided under Chapter 51.

Social Services

County social services agencies perform functions that are frequently referred to as "public welfare" and "child welfare" activities. The type of assistance varies considerably, but includes: (1) assistance to persons to enable them to cope adequately at home by providing in-home supportive services, home-delivered meals, transportation, and similar services; (2) investigation and services in child abuse and neglect cases; (3) community programs for juvenile offenders; and (4) supervision of alternative care for children, such as short-term shelter care, foster care, or placement in a group home or child caring institution. Legal services, housing assistance, work-related training services, family planning, information, and referral services and counseling are also provided.

Counties have considerable flexibility in determining how much funding to allocate for each type of service. The statutory requirements of counties in this area are conditional. Wisconsin statutes require counties to provide social services to persons who receive federal and state payments for supplemental security income (SSI) and AFDC, but the types of services are not specified. In addition, the requirements only extend to the limits of available state and federal funds and county funds required to match state funds.

Economic support programs such as Wisconsin Works, food stamps, and child care are not funded from community aids. Further, counties do not deliver or coordinate all local social services. Some state-funded social services, such as family planning, shelters for homeless persons, and assistance to victims of domestic abuse, are provided by private, nonprofit agencies that contract directly with DHFS. In addition, many programs are provided by private agencies that are funded through pri-

vate contributions and community fund-raising organizations or which are paid for directly by persons with adequate financial resources.

Mental Health, Developmental Disabilities and Substance Abuse Services

Counties also provide services to persons with a range of mental, developmental, and behavioral disabilities. These services frequently include: diagnosis and evaluation, emergency treatment, inpatient and outpatient care, training, assistance with residential arrangements (such as group homes, adult family homes, or supervised apartments), transportation, and work-related services (such as sheltered employment, job placement assistance, or vocational training). In each case, the disability must be long-term in duration and constitute a substantial handicap to the individual. Under s. 51.42 of the statutes, counties are required to provide certain services, including diagnosis and evaluation, emergency services, inpatient and outpatient care, supportive transitional services, and residential facilities. In addition, other services are mandated for clients with developmental disabilities. However, these requirements apply only within the limits of available state and federal funds and any county funds appropriated as matching funds.

Community Aids Formula

As discussed previously, the community aids formula has never been used as a mechanism for redistribution of base funding for community aids. Rather, the formula has been used as a distribution mechanism for increased funding of community aids and as a tool for identifying those counties which are underfunded relative to an equitable distribution of community aids funds. The formula was designed to determine an equitable distribution of aids funding. The formula is based on three factors, each weighted equally:

a. *Each county's share of the state's medical assistance population.* This factor is intended as a measure of the potential demand for human services within each county.

b. *The urban-rural nature of each county.* This factor provides proportionately larger allocations to counties with the most urban and most rural populations and is intended as a measure of both the degree of social and economic problems within each county and the relative cost of providing services.

Urban counties are defined as those counties in which 70% or more of their population are living in communities of 2,500 or more. These counties would receive 40% of the allocation available based on this factor. Rural counties are defined as those counties in which less than 9% of their population are living in communities of 2,500 or more persons. These counties would receive 40% of the allocation available for this factor. The remaining 20% would be allocated to those counties with between 9% and 70% of their populations living in communities of 2,500 or more.

c. *The per-capita market value of the taxable property in each county.* This factor is intended as a measure of each county's ability to provide human services beyond the level of state and federal funding and the required county match.

The community aids formula was originally used as a mechanism for distributing increased community aids funding to counties. Chapter 34, Laws of 1979, provided, for the period beginning January 1, 1980, an increase of 15% of 1979 contract levels to be distributed to counties for expanded services based on the community aids formula. Under the same provision, up to 8% of the 1979 contract level was available to counties if matched by an equal portion of county tax levy or state revenue sharing funds.

Overall, because the community aids formula is based on three factors which change from year to

year, a county's need for community aids funding as measured by the formula may also shift from year to year relative to other counties. For this reason, "equity" in the distribution of the basic county allocation is not entirely possible unless funds are reallocated among counties from year to year or unless sufficient new funds are appropriated to enable all counties to receive 100% of their formula amount.

The community aids formula is not used every year to determine county allocations. It has only been used a few times to allocate BCA funds, the last being in 1991. Otherwise, counties receive the same percentage increase or decrease, as determined by the level of available funds.

State Program Monitoring and Evaluation

The Department uses several tools to monitor and assess county human services programs. These include a requirement that counties submit budgets to DHFS and an annual contract the Department signs with each county and uses to subsequently audit the county and fiscal and program information collected from each county. These monitoring and evaluation tools are discussed below. In addition, regional staff are assigned by the Department to specific counties to monitor programs and serve as liaison staff.

County Budgets

Counties are required to submit annual budgets for human services that are developed as part of the county budgeting process. Annually, the Department informs each county, by mid-summer, of the estimated amount of community aids funds the county will receive in the succeeding calendar year. A county is then required to assess, with public participation, the needs of its clients and the resources available to meet these needs. Once the budget is developed, it must be submitted to the

county executive, county administrator, or county board for review and then be transmitted to DHFS by December 1 of each year.

State-County Contract

DHFS is required to submit a model of the state-county contract covering the administration of community aids programs to each county by May 1 of each year. In addition, the Department transmits the contracts containing estimated allocation amounts to each county in late fall. The county board must approve the contract by January 1 of the year in which it takes effect, unless an extension is granted. The contract is between the Department and the county board and legally obligates the parties to expend only the amount of available state and federal funds and county funds used to match state funds.

The contract includes the following provisions:

a. A requirement that the county comply with state statutes and administrative rules, federal law and regulations, departmental memoranda addressing social services standards and accounting standards, the human services reporting system handbook, and the accounting principles, policies and allowable costs manual;

b. A provision that the contract is contingent upon authorizations in federal and state law;

c. A requirement that fiscal and client reports and records the county keeps be submitted to the Department, within the applicable federal and state laws and departmental regulations concerning confidentiality of client records; and a requirement that the Department provide counties 45 days' notice of any changes in record-keeping requirements if such requirements are not the result of changes in federal or state laws, rules or regulations, or court orders;

d. Authority for the Department to conduct periodic financial and compliance audits and for

the county to contract for an audit with an independent, nongovernmental auditor;

e. The process for handling contract interpretation disagreements;

f. The process by which the Department reimburses counties; and

g. An assurance that the county has an affirmative action plan and that the county will implement the requirements of the federal Americans with Disabilities Act.

Human Services Reporting System

Counties are required to report certain types of information to DHFS through the human services reporting system (HSRS). Information contained in HSRS includes clients served, services received, and expenditures for services provided through the community aids, community options, youth aids, intoxicated driver, and community integration programs. This system includes two types of reports: client-specific reports on persons served and summary reports on expenditures for services. Information collected in HSRS is used to comply with federal and state reporting requirements.

Counties are required to report on the following 10 data elements for every client served with community aids funding: (1) agency identification; (2) client identification; (3) birthdate; (4) sex; (5) ethnic group; (6) standard program category cluster (described below); (7) days of care for community residential services, inpatient and institutional care, and care in an institution for mental diseases; (8) target group; (9) client characteristics; and (10) community aids child care client characteristics. Reports containing client-specific information are required on an annual basis.

Counties are required to submit annual and mid-year summary information to the Department.

This summary data includes information on the total expenditures funded by: (a) state aid, local property tax, shared revenues, and donor match; and (b) all county agency revenues, by target population and service type.

Based on preliminary data, in 2001, counties reported serving 358,572 clients through community aids, the community options program, youth aids and related programs. This represented a 2.5% decrease over the number of clients counties reported serving in 2000. County expenditures from all sources (including community aids, community options, youth aids, and those reimbursed by other funding sources such as medical assistance and private insurance) for human services totaled over \$1,593.4 million in 2001, which represented a 7.1% increase over 2000. Appendix IX provides additional information regarding the number of clients served and expenditures by target group and service type for calendar year 2001. Appendix X provides

definitions, developed by DHFS, for the eight target groups.

Fiscal Reporting System

Counties are also required to submit monthly reports that indicate expenditures based on the categories included in the state contract. This fiscal reporting system, the community aids reporting system (CARS), is used to authorize the payment of funds to counties. The categories included in the contract are those for which funding is distributed and are not the categories used by counties for HSRS. In addition, these reports do not indicate expenditures by fund source because community aids funds are not distributed to counties in that manner. Because CARS data elements are based on budget contract control categories whereas the human services reporting system data elements encompass clients served in broad program categories, it is generally not possible to make data comparisons between the two reporting systems.

APPENDICES

This paper includes the following 10 appendices.

- Appendix I indicates community aids expenditures from 1979-80 through 2002-03.
- Appendix II indicates county expenditures over the required match for calendar year 2000 and 2001.
- Appendix III identifies which service fees are mandatory, exempt, or optional.
- Appendix IV indicates the calendar year 2003 community aids allocations to counties.
- Appendix V lists eligible community aids services.
- Appendix VI provides a comparison of community aid allocations by county for calendar years 1997 through 2003.
 - Appendix VII provides community aids allocations by county for 2003 on a per capita basis.
 - Appendix VIII indicates the annual allocation of additional federal foster care funds for 2000 and 2001.
 - Appendix IX indicates the number of clients served and county expenditures on human services funded with community aids, the community options program, youth aids and related programs in calendar year 2001.
 - Appendix X describes the target groups used to define the populations that receive human services.

APPENDIX I

Community Aids Expenditures by State Fiscal Year

Fiscal Year	GPR	FED	Total
1979-80	\$136,304,100	\$63,010,300	\$199,314,400
1980-81	147,853,500	70,444,700	218,298,200
1981-82	162,673,000	57,538,900	220,211,900
1982-83	164,789,500	58,521,400	223,310,900
1983-84	164,911,600	58,354,800	223,266,400
1984-85	177,969,800	62,527,600	240,497,400
1985-86	191,079,700	66,878,400	257,958,100
1986-87	205,500,500	61,891,300	267,391,800
1987-88	186,899,800	65,895,300	252,795,100
1988-89	178,926,100	65,604,000	244,530,100
1989-90	183,240,900	69,068,500	252,309,400
1990-91	199,961,300	65,020,600	264,981,900
1991-92	199,842,600	102,689,300	302,531,900
1992-93	209,070,200	98,864,300	307,934,500
1993-94	191,742,800	113,221,600	304,964,400
1994-95	216,452,700	104,540,000	320,992,700
1995-96	217,692,800	113,241,700	330,934,500
1996-97	205,379,800	97,397,700	302,777,500
1997-98	177,322,500	130,856,400	308,178,900
1998-99	175,393,200	123,651,100	299,044,300
1999-00	175,393,200	118,848,200	294,241,400
2000-01	180,596,000	120,911,000	301,507,000
2001-02	172,911,900	90,442,200	263,354,100
2002-03	177,353,700*	84,669,600**	262,023,300

*Amount appropriated

**Estimate

Notes:

1) In addition to the expenditures identified above, program revenue from the drug abuse program improvement surcharge (DAPIS) was expended for community aids -- \$800,000 in 1993-94 and \$250,000 in 1997-98.

2) GPR amounts shown for fiscal years 1987-88 through 1998-99 reflect the transfer of youth aids maintenance-of-effort funding from community aids to the youth aids program, beginning in calendar year 1988. The annual amount transferred was \$25,790,500.

3) Beginning in fiscal year 1996-97, the amounts shown reflect the transfer of GPR and federal funding for child care, to the Department of Workforce Development under provisions of 1995 Wisconsin Act 289.

4) Beginning in 2001-02, figures represent expenditures after Milwaukee County's contribution for child welfare services (\$38,792,200) and after Family Care transfers.

APPENDIX II

Community Aids County Overmatch Expenditures Calendar Years 2000 and 2001

County	2000	2001	County	2000	2001
Adams	\$870,120	\$842,164	Marathon	\$8,205,081	\$8,735,733
Ashland	95,441	120,369	Marinette	1,920,815	2,112,464
Barron	1,942,196	1,806,926	Marquette	395,041	922,548
Bayfield	646,170	598,618	Menominee	183,182	114,050
Brown	13,436,949	14,950,206	Milwaukee	8,866,465	11,020,946
Buffalo	62,385	566,226	Monroe	2,115,103	2,211,237
Burnett	688,600	974,165	Oconto	2,483,029	2,736,937
Calumet	1,691,265	1,743,568	Oneida	1,010,407	1,599,115
Chippewa	601,318	967,396	Outagamie	10,918,937	12,698,099
Clark	1,230,236	1,711,855	Ozaukee	3,795,788	4,143,736
Columbia	1,598,667	2,192,666	Pepin	0	48,737
Crawford	230,759	416,917	Pierce	589,032	754,428
Dane	43,125,277	43,794,021	Polk	1,643,718	1,980,340
Dodge	5,046,865	5,782,101	Portage	1,136,748	1,850,449
Door	2,303,073	2,642,383	Price	703,059	899,684
Douglas	1,129,932	1,032,470	Racine	2,213,977	2,523,700
Dunn	1,882,830	1,216,928	Richland	0	429,297
Eau Claire	6,136,653	6,049,115	Rock	7,221,878	8,408,013
Florence	0	0	Rusk	14,775	133,513
Fond du Lac	4,240,555	3,290,315	St. Croix	2,757,331	3,211,835
Forest	212,002	357,496	Sauk	3,765,518	3,827,179
Grant	611,017	643,568	Sawyer	450,373	381,103
Green	1,743,654	1,721,219	Shawano	374,374	384,551
Green Lake	1,552,570	1,755,621	Sheboygan	8,832,841	9,615,106
Iowa	698,726	670,279	Taylor	417,655	135,536
Iron	53,194	230,601	Trempealeau	345,553	424,244
Jackson	529,218	703,041	Vernon	403,413	1,061,690
Jefferson	3,025,323	7,171,139	Vilas	389,462	645,583
Juneau	834,562	456,808	Walworth	4,676,633	5,270,588
Kenosha	3,180,159	4,003,752	Washburn	656,269	649,814
Kewaunee	298,521	194,100	Washington	4,155,060	4,780,113
La Crosse	5,191,514	5,880,709	Waukesha	12,643,794	12,604,828
Lafayette	397,613	468,972	Waupaca	2,569,408	3,093,239
Langlade	1,498,661	1,529,985	Waushara	1,709,006	2,516,596
Lincoln	872,112	868,613	Winnebago	7,323,730	16,055,555
Manitowoc	3,625,440	4,273,740	Wood	<u>5,116,593</u>	<u>2,221,354</u>
			Total	\$221,287,625	\$251,829,992

APPENDIX III

Services for Which Fees are Mandatory, Exempt or Optional

Services for Which a Fee is Mandatory	
<ul style="list-style-type: none"> • Child care (if income is above Department-established limit) • Respite care provided or purchased by Chapter 51 boards • Family support • Adoptions under s. 48.837(7) of the statutes • Adult family home care • Foster and group home care • Shelter care except in domestic abuse emergencies • Court intake and studies: divorce settlements and custody and visitation studies not funded by the social services block grant • Juvenile correctional institution services • Congregate and home-delivered meals funded under the community options program 	<ul style="list-style-type: none"> • Detoxification • Inpatient & Institutions for Mental Disease • State Centers for the Developmentally Disabled/nursing • Child caring institutional care • Community-based treatment facility care • Medical day center services • Counseling and therapy not funded by the social services block grant • Community support: assessment & diagnosis, education & training, counseling & psychotherapy, medical support, transportation • Intake assessments for intoxicated use of motor vehicle, boat, all terrain vehicle, snow mobile. • Intake assessment for use of controlled substances
Services Which are Exempt from Fees	
<ul style="list-style-type: none"> • Sheltered employment • Interpreter services and adaptive equipment needed for access to services • Adoption services other than by private agencies to non-relatives • Court intake and studies under Chapters 48, 51 and 55 ordered by the court & required by Statutes • Adult restitution • Family planning • Congregate and home-delivered meals (funded by the Older Americans Act) • Community prevention, organization and awareness 	<ul style="list-style-type: none"> • Crisis intervention: information and referral • Nonmedical day center services • Community support: eligibility determination, advocacy, person locating • Outreach, information and referral • Intake assessment: community options program, child abuse and neglect • Advocacy and defense resources • Health screening and accessibility • Staff Training and development • Agency/systems management
Services for Which Counties May Charge a Fee	
<ul style="list-style-type: none"> • Respite care purchased or provided by county social services departments • Supportive home care • Housing/energy assistance • Specialized transportation and escort services • Work-related services and supported employment (other than sheltered employment) • Daily living skills training (except for nonmedical day services) • Interpreter services and adaptive equipment (not needed for access to services) • Shelter care in domestic abuse emergencies • Court intake and studies under Chapters 48, 51 and 55 requested by an individual • Adult day care 	<ul style="list-style-type: none"> • Court intake and studies for divorce assessments custody and visitation studies funded by the federal social services block grant • Juvenile probation and supervision • Juvenile reintegration and aftercare • Juvenile restitution • Congregate and home-delivered meals (not funded by Older Americans Act) • Recreation activities • Crisis intervention: counseling, supervision to minors, transportation • Counseling and therapy funded by the social services block grant • Case management • Protective payment/guardianship

APPENDIX IV
Calendar Year 2003
Community Aids Allocations to Counties

County	Basic County Allocation	Alzheimer's Family and Caregiver Support	Mental Health Block Grant	Substance Abuse Prevention and Treatment Block Grant	Family Support	Total Allocation	Required County Match
Adams	\$801,850	\$8,133	\$8,555	\$34,248	\$16,828	\$869,614	\$83,376
Ashland	1,105,973	9,903	9,580	28,276	28,202	1,181,934	119,820
Barron	2,073,416	19,707	20,066	79,713	50,087	2,242,989	215,874
Bayfield	815,278	7,681	7,354	35,262	31,684	897,259	84,925
Brown	9,428,275	84,590	98,340	365,279	197,378	10,173,862	1,005,966
Buffalo	859,259	7,806	7,803	23,204	16,634	914,706	87,914
Burnett	834,533	7,726	7,248	28,760	15,689	893,956	87,796
Calumet	1,237,397	11,021	12,388	46,328	37,481	1,344,615	131,468
Chippewa	2,776,639	25,728	27,037	96,341	55,842	2,981,587	310,672
Clark	1,912,544	16,249	16,032	55,026	40,172	2,040,023	207,538
Columbia	1,928,091	18,385	16,818	77,128	45,478	2,085,900	201,984
Crawford	1,437,668	8,431	7,939	32,086	18,811	1,504,935	145,051
Dane	17,694,684	139,786	160,098	650,692	293,949	18,939,209	2,041,506
Dodge	3,099,388	30,708	31,007	111,966	78,028	3,351,097	332,413
Door	1,138,883	8,593	7,665	46,219	45,433	1,246,793	118,740
Douglas	2,961,938	25,241	25,572	110,750	48,175	3,171,676	310,430
Dunn	1,801,909	16,175	18,754	69,453	32,108	1,938,399	184,552
Eau Claire	5,177,932	44,304	51,569	189,338	88,244	5,551,387	546,730
Florence	456,176	5,335	3,434	8,512	13,660	487,117	46,352
Fond du Lac	3,770,419	14,960	37,307	153,543	98,901	4,097,570	387,918
Forest	734,726	6,921	5,386	29,605	15,930	792,568	74,909
Grant	2,414,098	23,098	21,745	77,899	59,825	2,596,665	250,313
Green	1,262,101	12,412	11,554	45,365	27,976	1,359,408	135,969
Green Lake	820,687	7,914	6,805	32,340	20,632	888,378	88,169
Iowa	945,542	8,053	8,335	29,860	22,932	1,014,723	99,504
Iron	433,613	5,918	3,621	7,985	9,048	460,185	44,954
Jackson	1,399,739	9,516	8,922	39,385	33,994	1,491,556	142,692
Jefferson	2,841,850	27,168	26,128	109,299	69,461	3,073,906	309,563
Juneau	1,091,888	10,678	10,820	42,890	24,826	1,181,102	109,253
Kenosha	7,947,178	65,985	72,813	326,821	111,865	8,524,662	847,333
Kewaunee	881,623	7,973	7,486	26,797	27,444	951,323	90,375
La Crosse	4,557,605	30,800	56,779	204,793	99,173	4,949,150	490,109
Lafayette	875,929	8,101	7,785	22,055	37,214	951,084	89,908
Langlade	1,179,133	10,578	12,236	50,577	26,001	1,278,524	122,235
Lincoln	1,318,337	12,976	7,585	31,351	53,287	1,423,535	142,847
Manitowoc	3,949,471	36,420	35,127	140,547	77,626	4,239,191	409,146
Marathon	5,112,461	45,841	52,071	215,234	110,648	5,536,256	549,231
Marinette	1,827,099	18,933	18,732	75,173	49,370	1,989,307	196,177
Marquette	659,528	7,315	6,423	23,939	18,005	715,210	70,706
Menominee	1,120,620	6,124	5,752	41,427	22,872	1,196,795	115,895

APPENDIX IV (continued)

**Calendar Year 2003
Community Aids Allocations to Counties**

County	Basic County Allocation	Alzheimer's Family and Caregiver Support	Mental Health Block Grant	Substance Abuse Prevention and Treatment Block Grant	Family Support	Total Allocation	Required County Match
Milwaukee	\$47,006,377	\$242,158	\$685,914	\$2,431,021	\$852,668	\$51,218,138	\$5,677,149
Monroe	1,887,083	17,861	18,307	71,115	47,550	2,041,916	210,729
Oconto	1,361,743	13,077	13,353	48,966	41,726	1,478,865	139,591
Oneida	1,500,776	12,776	11,797	64,848	34,894	1,625,091	160,193
Outagamie	6,372,739	59,560	64,126	236,002	135,504	6,867,931	662,552
Ozaukee	2,618,310	24,198	25,233	85,354	59,410	2,812,505	286,355
Pepin	618,944	6,233	4,795	11,569	14,196	655,737	64,493
Pierce	1,399,492	12,136	13,239	51,163	27,996	1,504,026	146,990
Polk	1,892,175	17,622	17,164	68,628	41,518	2,037,107	201,161
Portage	1,899,711	9,103	25,490	111,625	57,412	2,103,341	203,456
Price	853,083	8,049	8,029	19,379	26,183	914,723	88,009
Racine	10,718,558	92,485	100,488	500,171	168,420	11,580,122	1,163,992
Richland	924,175	3,565	9,465	32,819	19,306	989,330	95,389
Rock	9,209,114	72,180	73,312	343,850	130,421	9,828,877	1,007,769
Rusk	1,097,779	8,627	9,661	30,407	18,690	1,165,164	111,754
St. Croix	1,709,265	16,748	17,529	70,176	58,331	1,872,049	191,110
Sauk	2,320,890	19,547	17,541	82,089	46,635	2,486,702	247,176
Sawyer	1,136,175	7,940	8,146	50,066	37,275	1,239,602	116,956
Shawano	1,641,546	17,002	16,604	73,720	39,067	1,787,939	175,778
Sheboygan	5,020,139	43,744	51,197	178,215	98,798	5,392,093	517,374
Taylor	1,238,592	8,511	9,043	31,092	20,050	1,307,288	125,677
Trempealeau	1,570,466	15,945	15,769	43,091	28,096	1,673,367	160,767
Vernon	1,465,655	13,276	12,392	44,268	25,175	1,560,766	150,100
Vilas	879,102	7,418	7,434	40,862	21,987	956,803	87,335
Walworth	3,406,843	25,376	22,005	118,911	66,956	3,640,091	368,573
Washburn	900,763	7,918	8,386	27,842	17,128	962,037	92,780
Washington	3,489,766	30,789	37,470	131,927	96,353	3,786,305	389,563
Waukesha	11,387,533	102,609	109,469	421,473	255,291	12,276,375	1,282,121
Waupaca	1,978,054	21,575	20,786	80,798	52,668	2,153,881	207,859
Waushara	1,072,706	10,263	10,433	37,207	41,622	1,172,231	117,046
Winnebago	7,244,186	64,572	68,961	253,027	126,074	7,756,820	767,256
Wood	<u>3,666,809</u>	<u>33,788</u>	<u>39,193</u>	<u>128,562</u>	<u>86,461</u>	<u>3,954,813</u>	<u>415,265</u>
Total	\$242,174,030	\$1,919,837	\$2,513,402	\$9,735,709	\$4,964,774	\$261,307,752	\$26,662,637

Note: In addition to these allocations, \$412,800 annually in the 2001-03 biennium is distributed to American Indian tribes and bands for child care for low-income families. These allocations do not reflect \$6,800,000 in additional foster care funds allocated to counties for programs to assist children and families

APPENDIX V

Eligible Community Aids Services

Child care

Supportive home care services

Specialized transportation and escort services

Community living/support services

- Adult day care
- Respite care
- Housing/energy assistance
- Daily living skills training
- Interpreter services and adaptive equipment
- Family support
- Congregate meals
- Home-delivered meals
- Family planning
- Protective payment/guardianship
- Case management

Investigations and assessments

- Court intake and studies
- Intake assessment

Community support

Work-related and day services

- Work-related services
- Nonmedical day care services

Supported employment services

Community residential services

- Adoptions
- Adult family home care
- Foster home care
- Group home care
- Shelter care
- Detoxification - Social setting
- Community-based residential facility care

Community treatment services

- Juvenile probation and supervision
- Juvenile reintegration and aftercare
- Restitution
- Crisis intervention
- Counseling/therapeutic resources
- Medical day treatment

Inpatient and institutional care

- Juvenile correctional institution services
- Detoxification - Hospital setting
- Inpatient
- Child caring institution services
- DD center/nursing home

Institution for mental disease (IMD) services

Community prevention, access and outreach

- Recreation/alternative activities
- Community prevention, organization and awareness
- Outreach
- Information and referral
- Advocacy and defense resources
- Health screening and accessibility

APPENDIX VI

Comparison of Calendar Year 1997 through 2003 Community Aids Allocations

County	1997	1998	1999	2000	2001	2002	2003*
Adams	\$850,888	\$854,198	\$832,378	\$867,491	\$869,266	\$871,357	\$869,614
Ashland	1,163,761	1,167,795	1,133,916	1,178,955	1,180,905	1,184,337	1,181,934
Barron	2,176,223	2,185,740	2,128,760	2,236,290	2,241,357	2,247,480	2,242,989
Bayfield	882,866	885,313	861,901	893,806	895,130	899,031	897,259
Brown	10,027,620	10,039,216	9,775,682	10,152,761	10,170,042	10,194,348	10,173,862
Buffalo	903,692	906,469	879,824	913,169	914,565	916,574	914,706
Burnett	877,450	880,648	856,418	892,361	893,932	895,397	893,956
Calumet	1,331,663	1,333,173	1,293,698	1,340,643	1,342,669	1,347,304	1,344,615
Chippewa	2,949,343	2,954,558	2,867,224	2,976,285	2,980,875	2,987,621	2,981,587
Clark	2,011,364	2,017,007	1,957,749	2,035,964	2,039,336	2,044,180	2,040,023
Columbia	2,055,392	2,024,203	2,003,155	2,081,218	2,084,571	2,090,089	2,085,900
Crawford	1,493,161	1,497,555	1,451,485	1,504,194	1,505,954	1,508,060	1,504,935
Dane	18,562,325	18,046,018	18,116,305	18,904,385	18,942,16	18,977,654	18,939,209
Dodge	3,292,438	3,300,556	3,207,181	3,341,920	3,348,271	3,357,832	3,351,097
Door	1,232,290	1,234,667	1,200,098	1,242,280	1,243,743	1,249,268	1,246,793
Douglas	3,137,763	3,146,061	3,057,319	3,168,171	3,160,074	3,178,112	3,171,676
Dunn	1,902,315	1,909,823	1,859,550	1,934,933	1,938,413	1,942,315	1,938,399
Eau Claire	5,469,166	5,483,581	5,328,513	5,542,375	5,551,900	5,562,638	5,551,387
Florence	483,472	484,857	469,933	485,959	486,468	488,108	487,117
Fond du Lac	5,054,362	5,069,890	4,925,160	5,109,467	4,090,871	4,083,327	4,075,130
Forest	779,871	783,727	764,243	791,215	792,194	794,165	792,568
Grant	2,574,981	2,579,886	2,503,181	2,591,080	2,592,977	2,601,912	2,596,665
Green	1,333,984	1,338,238	1,301,356	1,356,193	1,358,746	1,362,150	1,359,408
Green Lake	876,440	878,110	853,110	886,274	887,664	890,161	888,378
Iowa	992,709	997,946	972,167	1,012,249	1,013,471	1,016,778	1,014,723
Iron	458,113	459,055	444,381	459,530	460,049	461,127	460,185
Jackson	1,476,778	1,480,306	1,435,865	1,488,628	1,490,543	1,494,597	1,491,556
Jefferson	3,041,022	3,047,440	2,960,861	3,067,414	3,071,646	3,080,081	3,073,906
Juneau	1,160,356	1,163,716	1,131,931	1,178,250	1,180,427	1,183,474	1,181,102
Kenosha	8,286,313	8,319,518	8,104,316	8,507,906	8,528,651	8,541,929	8,524,662
Kewaunee	948,354	949,644	920,588	948,959	949,881	953,240	951,323
LaCrosse	6,061,152	6,038,853	5,922,531	6,188,500	4,973,740	4,959,057	4,949,150
Lafayette	935,813	938,126	910,183	946,761	948,392	952,987	951,084
Langlade	1,254,161	1,257,477	1,223,537	951,408	953,651	1,281,087	1,278,524
Lincoln	1,404,764	1,409,515	1,368,495	1,742,033	1,744,134	1,426,401	1,423,535
Manitowoc	4,162,415	4,174,094	4,056,548	4,230,479	4,238,449	4,247,773	4,239,191
Marathon	5,400,634	5,420,914	5,281,063	5,521,750	5,533,836	5,547,365	5,536,256
Marinette	1,970,671	1,974,429	1,918,943	1,984,543	1,987,196	1,993,278	1,989,307
Marquette	704,268	706,037	686,162	713,189	714,425	716,644	715,210
Menominee	1,174,690	1,179,688	1,148,557	1,194,908	1,196,000	1,199,230	1,196,795

APPENDIX VI (continued)

**Comparison of Calendar Year 1997 through 2003
Community Aids Allocations**

County	1997	1998	1999	2000	2001	2002	2003*
Milwaukee#	\$93,645,763	\$93,499,275	\$91,003,231	\$93,792,193	\$91,975,793	\$51,927,874	\$51,218,138
Monroe	1,990,787	1,999,681	1,948,427	2,035,820	2,040,173	2,046,016	2,041,916
Oconto	1,454,215	1,458,292	1,417,745	1,474,179	1,476,701	1,481,825	1,478,865
Oneida	1,581,509	1,587,273	1,546,416	1,620,479	1,624,140	1,628,353	1,625,091
Outagamie	6,794,371	6,807,088	6,609,634	6,854,428	6,865,136	6,881,778	6,867,931
Ozaukee	2,794,507	2,799,650	2,716,182	2,807,359	2,810,913	2,818,195	2,812,505
Pepin	646,692	649,311	630,099	654,470	655,397	657,083	655,737
Pierce	1,479,264	1,483,045	1,441,083	1,500,955	1,503,683	1,507,067	1,504,026
Polk	1,997,581	2,003,700	1,947,339	2,032,796	2,036,221	2,041,331	2,037,107
Portage	2,591,884	2,598,077	2,528,653	2,624,938	2,115,872	2,107,472	2,103,341
Price	901,799	906,049	880,794	912,129	913,366	916,577	914,723
Racine	11,335,895	11,370,602	11,074,613	11,560,093	11,583,27	11,603,410	11,580,122
Richland	1,234,302	1,238,486	1,202,545	1,243,704	1,245,098	991,339	989,330
Rock	9,630,387	9,663,457	9,399,661	9,815,329	9,833,852	9,848,887	9,828,877
Rusk	1,158,803	1,161,882	1,128,294	1,163,455	1,165,268	1,168,147	1,165,164
St. Croix	2,434,113	1,850,398	1,799,458	1,865,622	1,868,533	1,875,764	1,872,049
Sauk	1,225,198	2,442,768	2,375,980	2,481,317	2,486,171	2,491,746	2,486,702
Sawyer	1,776,480	1,198,765	1,194,484	1,236,138	1,237,571	1,242,071	1,239,602
Shawano	1,846,250	1,778,408	1,727,644	1,784,536	1,786,720	1,791,507	1,787,939
Sheboygan	5,324,466	5,335,664	5,180,747	5,381,936	5,390,939	5,403,001	5,392,093
Taylor	1,290,804	1,296,046	1,258,771	1,305,840	1,307,629	1,309,979	1,307,288
Trempealeau	1,662,344	1,666,524	1,616,537	1,671,207	1,673,355	1,676,780	1,673,367
Vernon	1,540,597	1,544,724	1,499,357	1,558,389	1,560,932	1,563,950	1,560,766
Vilas	944,709	945,889	919,345	954,657	956,021	958,714	956,803
Walworth	3,586,708	3,595,917	3,492,706	3,633,734	3,639,564	3,647,494	3,640,091
Washburn	955,355	957,851	930,716	960,511	961,977	963,673	962,037
Washington	3,755,038	3,760,244	3,649,997	3,776,305	3,781,861	3,793,888	3,786,305
Waukesha	12,188,780	12,204,060	11,840,848	12,252,919	12,269,786	12,301,117	12,276,375
Waupaca	2,129,436	2,133,392	2,073,271	2,148,467	2,151,692	2,158,179	2,153,881
Waushara	1,152,154	1,155,190	1,122,815	1,167,364	1,169,407	1,174,563	1,172,231
Winnebago	7,622,122	7,643,601	7,427,107	7,742,352	7,757,280	7,772,560	7,756,820
Wood	<u>3,857,711</u>	<u>3,874,634</u>	<u>3,773,081</u>	<u>3,943,281</u>	<u>3,952,066</u>	<u>3,962,781</u>	<u>3,954,813</u>
Total	\$303,385,069	\$303,127,990	\$295,471,847	\$306,520,801	\$302,293,645	\$262,441,589	\$261,307,752

Note: In addition to the allocations identified, \$412,800 is distributed to American Indian tribes and bands for childcare for low-income families and additional foster care funds are distributed to counties for programs to assist the children and families.

*Allocation after adjusting for transfers for Family Care.

#Beginning in 2002, Milwaukee County's allocation was reduced by \$38,792,200 for child welfare services in the county.

APPENDIX VII

2003 Per Capita Community Aids Allocations

Rank	County	Per Capita Allocation*	Rank	County	Per Capita Allocation*
1	Menominee	\$260.46	36	Marquette	\$48.42
2	Florence	93.91	37	Polk	47.80
3	Pepin	88.81	38	Waushara	47.73
4	Crawford	86.46	39	Lincoln	47.54
5	Forest	78.37	40	Dunn	47.48
6	Jackson	76.96	41	Sheboygan	47.24
7	Rusk	75.38	42	Juneau	47.15
8	Sawyer	74.75	43	Kewaunee	46.44
9	Douglas	72.62	44	Green Lake	46.07
10	Ashland	69.61	45	La Crosse	45.64
11	Iron	66.39	46	Marinette	45.41
12	Taylor	66.30	47	Vilas	44.59
13	Buffalo	65.55	48	Sauk	43.89
14	Rock	63.82	49	Brown	43.88
15	Trempealeau	61.09	50	Iowa	43.83
16	Langlade	60.83	51	Door	43.53
17	Racine	60.81	52	Oneida	43.43
18	Clark	60.25	53	Shawano	43.32
19	Bayfield	58.79	54	Marathon	43.26
20	Washburn	58.53	55	Dane	43.15
21	Lafayette	58.52	56	Adams	42.78
22	Eau Claire	58.35	57	Outagamie	41.48
23	Price	57.56	58	Fond du Lac	41.33
24	Kenosha	55.71	59	Waupaca	40.93
25	Burnett	55.69	60	Oconto	40.18
26	Richland	54.79	61	Jefferson	39.87
27	Vernon	54.60	62	Pierce	39.83
28	Milwaukee	54.42	63	Green	39.57
29	Chippewa	52.69	64	Columbia	39.01
30	Wood	52.05	65	Walworth	38.51
31	Grant	51.76	66	Dodge	38.48
32	Manitowoc	50.51	67	Ozaukee	33.50
33	Barron	49.15	68	Waukesha	33.35
34	Monroe	48.77	69	Calumet	31.64
35	Winnebago	48.74	70	Washington	31.44
			71	Portage	30.83
			72	St. Croix	<u>27.67</u>
				Total	\$47.92

*Based on calendar year 2003 allocations and 2002 population estimate.

APPENDIX VIII

Additional Foster Care Funds Annual Allocations for 2002 and 2003

County	2002	2003	County	2002	2003
Adams	\$65,360	\$65,360	Manitowoc	\$109,862	\$109,862
Ashland	68,044	68,044	Marathon	150,461	150,461
Barron	90,219	90,219	Marinette	85,511	85,511
Bayfield	65,718	65,718	Marquette	61,498	61,498
Brown	216,620	216,620	Menominee	62,739	62,739
Buffalo	62,549	62,549	Milwaukee	0	0
Burnett	63,301	63,301	Monroe	91,368	91,368
Calumet	75,271	75,271	Oconto	78,207	78,207
Chippewa	100,319	100,319	Oneida	76,006	76,006
Clark	84,813	84,813	Outagamie	156,105	156,105
Columbia	85,058	85,058	Ozaukee	89,189	89,189
Crawford	66,597	66,597	Pepin	56,432	56,432
Dane	302,151	302,151	Pierce	73,954	73,954
Dodge	103,637	103,637	Polk	85,060	85,060
Door	70,293	70,293	Portage	102,575	102,575
Douglas	95,121	95,121	Price	62,943	62,943
Dunn	82,095	82,095	Racine	219,253	219,253
Eau Claire	130,447	130,447	Richland	66,950	66,950
Florence	54,415	54,415	Rock	185,452	185,452
Fond du Lac	115,548	115,548	Rusk	67,483	67,483
Forest	60,910	60,910	St. Croix	90,508	90,508
Grant	89,656	89,656	Sauk	91,950	91,950
Green	74,191	74,191	Sawyer	68,765	68,765
Green Lake	64,601	64,601	Shawano	83,364	83,364
Iowa	68,215	68,215	Sheboygan	123,973	123,973
Iron	54,675	54,675	Taylor	68,587	68,587
Jackson	67,503	67,503	Trempealeau	73,099	73,099
Jefferson	94,960	94,960	Vernon	78,880	78,880
Juneau	71,990	71,990	Vilas	67,875	67,875
Kenosha	181,564	181,564	Walworth	105,410	105,410
Kewaunee	63,494	63,494	Washburn	65,234	65,234
La Crosse	134,214	134,214	Washington	113,346	113,346
Lafayette	63,990	63,990	Waukesha	237,507	237,507
Langlade	70,223	70,223	Waupaca	87,582	87,582
Lincoln	72,372	72,372	Waushara	72,087	72,087
			Winnebago	149,992	149,992
			Wood	<u>110,659</u>	<u>110,659</u>
			Total	\$6,800,000	\$6,800,000

Note: Milwaukee County is not eligible to receive additional federal foster care funds since, under provisions of 1997 Wisconsin Act 27, DHFS is responsible for providing child welfare services in Milwaukee County.

APPENDIX IX

Clients Served and Expenditures Calendar Year 2001

By Target Group

	Clients		Expenditures	
	Number	Percent of Total	Amount (in millions)	Percent of Total
Developmentally Disabled	38,473	10.7%	\$457.6	28.7%
Mental Health	94,722	26.4	319.8	20.1
Substance Abuse	58,063	16.2	70.4	4.4
Physically and Sensory Disabled	9,683	2.7	65.9	4.1
Delinquent and Status Offenders	35,736	10.0	218.5	13.7
Abused and Neglected Children	40,789	11.4	189.6	11.9
Children and Families	35,307	9.8	68.9	4.3
Adults and the Elderly	<u>45,799</u>	<u>12.8</u>	<u>202.7</u>	<u>12.7</u>
Total	358,572	100.0%	\$1,593.4	100.0%

By Standard Program Category Cluster

	Clients		Expenditures	
	Number	Percent of Total	Amount (in millions)	Percent of Total
Child Care	1,251	0.2%	\$4.9	0.3%
Supportive Home Care	21,656	3.7	156.3	9.8
Specialized Transportation and Escort	11,733	2.0	21.7	1.4
Community Prevention, Access and Outreach ²	13,951	2.4	49.0	3.1
Community Living and Support Services	120,036	20.4	272.6	17.1
Investigation and Assessments	162,975	27.7	112.7	7.1
Community Support	8,443	1.4	49.2	3.1
Work Related and Day Services	27,628	4.7	99.6	6.3
Supported Employment	4,913	0.8	16.9	1.1
Community Residential Services	36,654	6.2	383.7	24.1
Community Treatment Services	143,600	24.4	199.5	12.5
Inpatient and Institutional Care ³	34,836	5.9	173.4	10.9
Juvenile Correctional Institutes ⁴	<u>1,130</u>	<u>0.2</u>	<u>53.8</u>	<u>3.4</u>
Total	587,676	100.0%	\$1,593.3	100.0%

¹Some clients are included in more than one category. In addition to the clients identified here, 22,835 families members were served in 2001. Child care expenditures do not reflect work- or training-related child care.

²Number of clients served may not represent accurate number of clients served since counties are not required to report these expenditures on a client-specific basis.

³Includes Institutes for Mental Diseases.

⁴Average daily population, estimate.

APPENDIX X

Community Aids Target Groups

Developmentally Disabled. Individuals who have a disability attributable to brain injury, cerebral palsy, epilepsy, autism, mental retardation, or another neurological condition closely related to mental retardation, or requiring treatment similar to that required for mental retardation, which has continued, or can be expected to continue, indefinitely and constitutes a substantial handicap for the individual.

Mental Health. Individuals with chronic mental illness, including adults with serious and persistent mental illness and children and adolescents with severe emotional disturbances, each of whom are unable to independently perform essential personal and social roles appropriate to their age and require or receive treatment or supervision in order to carry out activities of daily living or to participate in community living.

Substance Abuse. Individuals who use alcohol and/or other chemical substances which have mind altering effects to the extent that it interferes with or impairs physical health, psychological functioning, or social or economic adaptation, including occupational or educational performance and person or family relations. This group also includes a person whose use of alcohol and or other substances has resulted in a conviction for operating a motor vehicle while intoxicated, or a Department of Transportation referral for an assessment to determine the existence of a substance abuse disability.

Physically or Sensory Disabled. Individuals, under

the age of 65, who have a physical disability which impairs their mobility, are blind or visually impaired, or are deaf or hearing impaired and receive services for the purpose of assisting them to utilize their abilities, achieve their maximum potential in terms of level of functioning and independence in social roles, and fully access and participate in community life.

Delinquents or Status Offenders. Delinquent children include juveniles referred to court intake due to an allegation of delinquency, or found to be delinquent as defined under s. 938.02 (3m) of the statutes. Status offenders are those juveniles alleged to be in need of protection or services under s. 938.13 due to any of the following: (a) parental or guardian petition to control the juvenile; (b) truancy from school; (c) the juvenile is a school drop-out; (d) truancy from home; and (e) the juvenile under 10 years of age commits a delinquent act.

Abused and Neglected Children. A child who is, or is alleged to be, abused or neglected, as defined in s. 48.981 (1)(a), or is threatened with abuse or neglect. This definition includes physical or sexual abuse, neglect or emotional damage.

Children and Family. A child or family member that has service needs not specified in the other target groups.

Adults and the Elderly. Adults or elderly individuals who have service needs not specified in other target groups.